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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

		Application Number	10/636,057
		Filing Date	August 7, 2003
		First Named Inventor	Guy Boudreau
		Art Unit	3671
		Examiner Name	R. W. Addie
Total Number of Pages in This Submission	5	Attorney Docket Number	2224-00200 DVF

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>  <i>Amendment After Allowance Per 37 CFR § 1.312 (4 p.)</i>
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	CONLEY ROSE, P. C.	
Signature		
Printed name	DEREK V. FORINASH	
Date	October 11, 2005	Reg. No. 47,231

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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	October 11, 2005	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	GUY BOUDREAU	§	ART UNIT: 3671
SERIAL NO.:	10/636,057	§	
FILED:	August 7, 2003	§	EXAMINER: R. W. Addie
FOR:	SELF-LEVELING SYSTEM	§	CONFIRMATION NO.: 1029

**AMENDMENT AFTER ALLOWANCE PER 37 CFR § 1.312**

Atty. Dkt. No.: 2224-00200  
Clt. Ref. No. 42849-0001  
Date: October 11, 2005

Mail Stop Issue Fee  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA. 22313-1450

Sir:

Applicant petitions, pursuant to 37 C.F.R. § 1.312, after allowance of the above-identified application, to amend the specification as follows:

**Amendments to the Claims begin on page 2 of this paper.**

**Remarks begin on page 3 of this paper.**